FY24 Appropriations Community Projects Requests Job Aid

The Job Aid is a guide on filling out the Appropriations Request Application Form in OAM. Please email Appropriations@casey.senate.gov with any questions.

Background Information

- 1. Are you an entity based in Pennsylvania? Select "Yes" if your organization is headquartered in Pennsylvania.
- 2. Name of Requesting Organization: *Please write the full legal name of your organization. If you are submitting this request on behalf of an organization (e.g. if you are a lobbyist), please list the organization for whom the request is being made.*
- 3. Street Address: *Please write the legal street address*.
- 4. City: *Please write the legal city for your organization.*
- 5. State: *Please write the legal state for your organization.*
- 6. Zip Code: *Please write the legal zip code for your organization.*
- 7. Organization County (PA): Please select the Pennsylvania county your organization is primarily based in, if applicable. Select "Statewide" if your organization is not concentrated in one region of Pennsylvania, and "Not in PA" if your organization has no Pennsylvania presence.
- 8. What is the primary county of impact for this investment? *Please select the county in which the project will be taking place, or where the funding will primarily benefit the community.*
- 9. Please list any other counties in Pennsylvania that will benefit, if applicable. *This question offers additional space to list other counties that may benefit from the project request. For question #8, select the county where the greatest impact will be felt. For question #9, list any other counties that stand to also benefit.*
- 10. Organization Contact | Name: *Please provide the name of the point person <u>at the requesting organization</u>. <i>Note, this cannot be a lobbyist.*
- 11. Organization Contact | Email: *Please provide the email of the point person <u>at the requesting organization.</u> Note, this cannot be a lobbyist.*
- 12. Organization Contact | Number: *Please provide the phone number of the point person* <u>at</u> the requesting organization. Note, this **cannot** be a lobbyist.
- 13. Tax Identification Number: *Please provide the tax identification number for your organization. This information is required to make an award, if selected.*
- 14. Please provide a link to the applying organization's website, if possible.
- 15. Organization Designation: Is the requesting organization a 501c3 non-profit, non-profit that is not a 501c3, for-profit, state government or local government entity? Select the legal designation.
- 16. Non-Profit EIN: *If your organization is a non-profit, please provide the organization's Employer Identification Number.*
- 17. Is this request being submitted by a lobbyist? If the application is being submitted by a lobbyist, please fill out the drop-down questions on contact information for the lobbying firm and lobbyist the organization is working with during the FY24 appropriations process.
- 18. Is the requesting organization submitting multiple requests to Senator Casey's office?

- a. Priority Ranking: Please indicate the numeric priority of this request if you are making multiple requests, (e.g. Enter "1" to indicate that this is your highest priority, etc.)
- 19. Previous Appropriations Requests: *Has the requesting organization previously submitted appropriations requests to Senator Casey?*
 - a. Please describe your previous appropriations requests. *Provide a brief,* 2-3 sentence summary of your previous appropriations requests.

Funding Information

- 1. Under which appropriations bill does this request fall? Select the appropriate appropriations bill for this request. If you do not know, select "Unknown". If you do not know which bill and/or account your project falls under, stop the application & email appropriations@casey.senate.gov for clarification.
- 2. Which CDS-eligible account are you applying to? Please select the account your organization is applying for. If you are unsure about which account to select, please reach out to Senator Casey's office at appropriations@casey.senate.gov. Please note, these have changed slightly from the previous appropriations cycle.
- 3. U.S. Department of Agriculture Rural Development Funding: Are you requesting funds through the U.S. Department of Agriculture Office of Rural Development (Community Facilities OR Distance Learning, Telemedicine, and Broadband)? You should only apply for this account if staff in Senator Casey's Office has already informed you that your project belongs here. If your project is a general economic development project, please apply for the Economic Development Initiatives (EDI) account under HUD. If you have questions or are unsure about which account to apply to, please reach out to Senator Casey's office at appropriations@casey.senate.gov.
- 4. Defense-Related Funding: *If you have any questions about the defense-related inquiries in this form, please email Zachary_Shaw@casey.senate.gov*
- 5. What amount are you requesting? Please include the whole amount your organization is requesting for FY24 without decimals or abbreviations. Please note, this is not the full cost of the project if you already have existing funds. This figure should only be the amount you are requesting as congressionally directed spending.
- 6. Did this program or project receive funding from the federal government in FY22 and FY23?
 - a. FY22 and FY23 Funding Level: *Please include the whole amount received during FY22 or FY23 from any federal source for this project.*
 - b. Did the requesting organization receive funding for a congressional directed spending project from either a member of the House or Senate in FY22 or FY23? Please select "Yes" if your organization received funding for <u>ANY</u> congressionally directed spending project. This question is not project-specific and is intended to understand whether your organization has received funding for congressionally directed spending in previous application cycles.
- 7. Previous Grant Requests: Has the requestor applied for a federal grant for this project

in the past outside of the congressionally directed spending process? This question is project-specific and is intended to understand the full scope of federal funding sources for this project.

- a. What was the grant? Please list the specific grant program your organization applied to for this project.
- b. In what year did the requestor apply for the grant? *Please note the calendar year of your application for the grant.*
- c. What was the sponsoring entity? *Provide the name of the federal agency or office that administered or implemented the project.*
- d. Did Senator Casey offer a letter of support for the grant?
- 8. State and Local Authorization: Does this request require approval or permitting from state or local authorities? *Please indicate if any permitting is required from state or local authorities*.
 - a. If so, is that approval or permitting still pending? *Please list which* approvals/permits are necessary, from what entity they will be/have been granted, and when should be/were granted.

Request Information

- 1. Project Purpose: Please summarize your request and justification in two to three brief sentences. Provide a brief overview of your project and its expected impact in Pennsylvania.
- 2. Justification: Describe how this funding (or the federal program for which you are requesting funding) will impact the requesting organization's work, the local community, Pennsylvanians, and/or the Nation. For example, please indicate how this program funding will mitigate existing levels of geographic, racial, or socioeconomic inequalities in Pennsylvania, or how the program funding will mitigate the effects of climate change, or how the program of funding will contribute to the well-being and development of Pennsylvania's children. Please also indicate what support this initiative has at the state or local level, as relevant, and why other federal and non-federal sources of funding are insufficient.
- 3. Budget Breakdown: Please provide a breakdown of the budget for the project using the template provided in the provided guidance (Available in Section 4 of this application). Please break project funding down by funding source and component of the project using bullets. See guidance document for more detail.
- 4. Does the project meet the required cost share? Please note whether this project meets the required cost share for the relevant account as outlined in the FY24 guidance document.
- 5. Organization's Capacity: Please describe the requesting organization's capacity to carry out the project, including references to prior similar projects. Please use this space to mention local partnerships, specific personnel expertise, regional advantages, and other resources available.
- 6. Insufficient Allocation: Please describe the requesting organization's capacity to carry out the project if the full amount of the request cannot be met. This includes prior fundraising, state or federal funding, individual donations, and existing resources.
- 7. Have you submitted this request to another member of the Pennsylvania

- Congressional Delegation? Please select the relevant members of the Pennsylvania Congressional Delegation, if any, that have also received this request from your organization.
- 8. Has this request been submitted to Members of Congress in other states?
 - a. Please list the other Members of Congress: *Please list the other Members of Congress with the relevant states and districts included. Example:* "Representative Steny Hoyer (D-MD-05)."
- 9. If submitting multiple requests, please indicate the numeric priority of this request (e.g. enter "1" to indicate that this is your top priority, "2" to indicate that this is your second priority, and so on)
- 10. Certification: Please certify that all the information included in your application is accurate and that it is made in accordance with the applicable rules, fiduciary requirements, and bylaws of the organization.

Guidance

1. I attest that I have read this guidance and that, to the best of my knowledge, my community project is eligible for congressionally directed spending: *Please do a final review of the guidance document linked within the question and confirm that your organization's project adheres to the appropriate guidelines.*